

Prevention of Mother-to-Child Transmission of HIV



Generic Training Package Trainer Manual



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The WHO/CDC Prevention of Mother-to-Child Transmission of HIV Generic Training Package is a comprehensive approach to the training of healthcare workers. The other components in this package are

- Training Programme and Course Director Guide
- Participant Manual
- Presentation Booklet
- Pocket Guide
- Wall Charts
- CD-ROM containing MS® Word and Adobe Acrobat® (PDF) files for each programme component

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Abbreviations and Acronyms

AIDS	Acquired immunodeficiency syndrome
ANC	Antenatal care
ARV	Antiretroviral
ART	Antiretroviral therapy
CDC	United States Centers for Disease Control and Prevention
CMV	Cytomegalovirus
ELISA	Enzyme-linked immunosorbent assay
FAO	United Nations Food and Agricultural Organisation
HAART	Highly active antiretroviral therapy
HIV	Human immunodeficiency virus
IMCI	Integrated management of childhood illness
MAC	<i>Mycobacterium avium complex</i>
MCH	Maternal and child health
MTCT	Mother-to-child transmission of HIV
NGO	Non-governmental organisation
NVP	Nevirapine
OI	Opportunistic infection
PCP	<i>Pneumocystis carinii</i> pneumonia
PEP	Post-exposure prophylaxis
PLWHA	People living with HIV/AIDS
PMTCT	Prevention of mother-to-child transmission of HIV

RCHS	Reproductive and child health services
STD/I	Sexually transmitted disease/infection
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNFPA	United Nations Population Fund
UNGASS	United Nations General Assembly Special Session
UNICEF	United Nations Children's Fund
USAID	U.S. Agency for International Development
VCT	Voluntary Counselling and Testing
WHO	World Health Organization
ZDV	Zidovudine, the generic name for azidothymidine (AZT)



Introduction to the Trainer Manual

This Trainer Manual is designed to support the implementation of the Prevention of Mother-to-Child Transmission of HIV (PMTCT) Generic Training Course. The Trainer Manual contains the same material found in the Participant Manual, supplemented with specific instructions for the trainer.

The Trainer Manual contains the following materials:

- Information on how to prepare, plan, and organise each module
- Guidance about sections that might need to be customised or adapted for a specific region or country
- Training tools and tips on scheduling, training activities, and time management

Keep the Trainer Manual with you each day for use as a reference, but avoid reading directly from it during sessions.

Icon key

The Trainer Manual includes symbols (icons) in each section to direct you in conducting the sessions.



Trainer Instructions: Notes specific trainer tasks



Make These Points: Draws attention to key concepts for emphasis



Clock: Sets estimated time needed for session



Advance Preparation: Describes trainer preparation for the session



Pocket Guide: Refers the reader to material in the Pocket Guide

Text that appears in the Participant Manual is surrounded with a dashed border to help the trainer keep track of the materials available to the learners.

Before you offer this course

Teaching the course

Familiarise yourself with the training package, described later in this session, and review training guidelines. Ensure that trainers and participants have clear and accurate expectations about the course.

Trainers play a unique role in helping their audiences confront the dynamics of the HIV/AIDS epidemic. Although you might be an expert in technical content and training, your role in this course extends beyond lecturing or providing information. Trainers need to inform, support and acknowledge implementation issues within the social and cultural context of the existing training setting to ensure a successful experience for all PMTCT training participants.

This section will review the principles of adult learning generally and within the specific context of training to provide HIV/AIDS care.

Principles of adult learning

Principles to keep in mind when working with adult learners:

- Create a supportive learning environment and establish safe training practices, eg, be sure that learners feel confident their contributions will be received respectfully.
- Build trust with learners by demonstrating that you are equally committed to the course and are willing to share your own experiences.
- Provide opportunities for learners to practise what they are learning and to address feelings and ideas that arise.
- Build teamwork and a sense of group belonging by encouraging active participation.
- Be accountable. Explain how you know what you know.
- Create a culturally sensitive and respectful learning environment by becoming familiar with local customs and values.

The role of the trainer in adult learning

The trainer's role is to facilitate the learning experience of the adult learner. To that end, you should create a climate in which participants can accomplish course outcomes and explore participants' life experiences to help them to learn.

Trainer tips

- Emphasise the immediate usefulness and applicability of material presented. Adult learners are particularly receptive to information that will make a difference in their daily practice.
- Elicit personal experiences that are culturally sensitive and appropriate. Adult learners can bring a reservoir of experience to the course, and their contributions are an important resource for training programmes.
- Encourage group interaction and participation early in each session. During the first day or two, interact at least once with each participant, and encourage them to interact with you.
- Make an effort to learn participants' names early on and to use their names whenever possible.
- Instead of talking with other trainers during breaks, remain in the classroom and talk with participants.

- Be available after each session to answer questions and discuss concerns.
- Consult with participants throughout each presentation to gauge their comprehension and attentiveness. Generally, the more conversation and noise in a room, the less the participants are focused on the material. Pay attention to nonverbal cues to gauge learners' attentiveness.
- Praise or thank participants when they perform an exercise well, participate in a group discussion, ask a question or help other participants.

Strategies for educating adults

Presentations and discussions

Use didactic training methods (as directed on the following page) to present scientific and technical content. Avoid reading directly from the overheads or slides. Instead, supplement them with examples, practical problems, and discussion questions. Elicit feedback from the audience at critical junctures; encourage discussion.

Role-plays

Engage trainees in problem solving by having them act out situations they are likely to encounter in real life. Role-playing can be scripted or improvised.

Small group discussions

Facilitate small group discussions to foster team coherence. Those discussions provide trainers with an opportunity to validate or modify learners' perceptions and knowledge.

- Assign a topic, issue, or question that participants can address in small groups.
- Designate a leader to facilitate and summarise the group's findings.
- Consider the task objective as you determine how to constitute groups. You might divide participants according to discipline (nurses or midwives) or by region (clinic X or clinic Y). If you want the groups split up randomly you could ask participants to count off by threes (or any small number); the first person is in group 1, the second is in group 2, the third is in group 3, the fourth is group 1 and so on.

Storytelling

Use culturally appropriate stories from learners to illustrate critical points. Weave cultural beliefs and personal experiences into stories to convey information vividly.

Case studies

Present culturally relevant, hypothetical clinical situations. Ask learners to propose solutions.

Interactive exercises and games

Use interactive exercises to facilitate teambuilding and reinforce learning.

- Invite learners to consider a specific topic.
- Pose questions, allowing time for learners to record their answers.
- Encourage participants to discuss their answers and exchange ideas.
- Record responses on the flipchart and encourage learners to respond to the group's feedback.

Panel discussions

Use panel discussions to help participants gain insight into the physical, emotional, and financial impact of HIV/AIDS. Panels with persons infected or affected by HIV can be a powerful tool for influencing the attitudes and behaviours of healthcare workers. *Module 5: Stigma and Discrimination Related to MTCT* of the Generic Training Package recommends utilising a panel of people living with HIV/AIDS as one of the teaching methods. Other panels that may be considered for a national curriculum include:

- Healthcare workers panel: to share ideas for handling the emotional challenges of caring for patients with HIV infection.
- Ministry of Health leaders and staff member panel: to provide information about national policies and strategies for fighting HIV/AIDS.
- Nongovernmental organisation (NGO) employees panel: to share information about the important role of NGOs in providing PMTCT services and support for people living with HIV/AIDS (PLWHA).

The flow of training

Flow and pacing

Pay attention to the order and flow of activities to ensure that new information is assimilated at an appropriate pace. Make sure that learners complete the course with a clear action plan for applying their knowledge.

Didactic training

Didactic training progresses from the simple to the complex. The trainer first reviews and outlines fundamental concepts to establish a shared understanding of the basics. New material is integrated gradually and illustrated with practical examples when possible. Remember that learners can absorb and integrate only five or six new pieces of information at a time.

Interactive/experiential learning

In interactive or experiential learning, the trainer might start with a group activity. The learners then use this new, shared experience as a starting point for discussion.

Begin with a group activity or interaction. When the activity is over, the group should share observations about the experience and examine themes or patterns that have emerged. Focus on generalising, drawing inferences from the shared experiences and linking to practice (the “why” of learning). Training should focus on the practical application of new insights, information, and skills.

Trainer skills

Facilitating the group

A facilitator helps participants learn through individual and group discussions. As a trainer, you are the facilitator.

You should be thoroughly familiar with module content. Preparation is the key to conducting a successful training course. Complete the following before starting each module:

- Read module objectives and teaching exercises.
- Prepare for each of the exercises.
- Obtain and organise the materials needed.
- Read the text and overhead materials.

- Ensure that you understand all national/local policies; if the policies are not in the Participant Manual, have copies made for the participants.
- Read and understand key points at the end of each module.

Responsibilities of facilitator include the following:

- Introduce each module and key concept
- Lead group discussions and training exercises
- Answer questions
- Explain ideas and clarify issues
- Discuss how learners can apply the information to their own work
- Give constructive feedback

You are encouraged to go beyond formal lecturing. It is your job to answer questions, talk with participants about exercises, lead group discussions and give participants any help they need.

Familiarity with the local cultural environment is essential to effective group facilitation. Training strategies could require modification to respect various cultural standards. For example, in some countries, cultural norms dictate acceptable eye contact or physical proximity of the trainer and learners.

Managing difficult participants

Throughout training, continually assess the interpersonal dynamics of the group. Occasionally, the learning environment might be disrupted by individual participants. A difficult participant might be overly talkative or dominating in discussions. He or she could be determined to play “devil’s advocate” in every discussion or be disrespectful of other participants and, as a result, other participants may be hesitant to express themselves. Depending on the situation, the trainer should address such behaviours either in public or privately. It can be helpful to remind participants of the norms established at the beginning of the programme and to reinforce the ground rules throughout the course.

Eliciting participation from all participants

HIV/AIDS is a controversial subject in many communities that is likely to prompt fervent debate. To tackle key underlying issues and foster discussion, the trainer should actively engage participants who express disparate viewpoints. In some settings, the group might accept the position or approach presented in the curriculum. In others, the group could need additional time to reach consensus on complex issues.

Managing time

Times allocated for each session in the curriculum are guidelines only. All of the curriculum content is important; however, the trainer should acknowledge the particular needs, knowledge and experience level of the group and make adjustments accordingly.

For example, in countries where infection control is taught and principles applied routinely in clinical settings, there may be less time required on specific sessions. Where information and assistance is needed in application of infant-feeding recommendations, more time may be necessary.

Each trainer may re-allocate time provided that the key concepts of each module are addressed and the programme presented as a comprehensive PMTCT package.

Trainer preparation checklist

Daily preparation

Each day arrive with enough time to set up the materials and equipment and arrange the furniture and audiovisual equipment in a way that fosters learning and teamwork. An informal arrangement is more comfortable than an auditorium style, which creates a formal “lecture” atmosphere.

Climate setting

Ensure that the physical environment is comfortable, well lit, and adequately equipped. Create a psychological environment where learners feel accepted, respected, and supported.

Room setup

Because this course uses a combination of didactic, interactive, and experiential techniques, the classroom should have tables and chairs that can be rearranged easily. For didactic presentations, the room should be set up so that all participants can see the slides or overhead projections. For interactive activities, more informal arrangements work best. In either case, you might need to arrive early to organise the room.

Goals and objectives

Review the course goals and objectives.

Course content

Review existing resources to ensure you have all background materials related to the course content. Although you will not be able to answer every question, try to master the curriculum content and related support materials.

Course materials and teaching aids

Be sure that all educational materials (overheads, flipcharts, markers) are available and that equipment is in good working order.

Course schedule

The course schedule is outlined in the Participant Manual and re-printed below. It is recommended that each training day begin with a recap of key points covered the previous day. This can be done in approximately 15 minutes. Strategies to review the previous day’s learning points might include:

- The trainer presents yesterday’s key points using a lecture and question/answer format. If possible write the key points on the board or flipchart paper in the morning before participants arrive.
- Large group discussion—which the trainer may start by asking the group, “What were the most important points from yesterday’s presentation?” The trainer should then add any additional key points that the group may have missed.
- Small group discussion—trainees break into four small groups (or even pairs) and take five minutes to come up with the three most important points from yesterday’s presentations.

Once the key points have been summarised, ask trainees what questions they have from the material covered yesterday.

Course schedule

Although this PMTCT generic training programme was developed to be 6 days long including the optional field visit, it may be expanded or shortened, depending on the target population's learning needs, priorities, and resources. The syllabus for the generic course is presented below.

Course syllabus for PMTCT Generic Training Package

Day	Content
Pre-course session (2 hours)	Opening Ceremony and Introductions
Day 1	Module 1 Introduction to HIV/AIDS Module 2 Overview of HIV Prevention in Mothers, Infants, and Young Children
Day 2	Module 3 Specific Interventions to Prevent MTCT Module 4 Infant Feeding in the Context of HIV Infection
Day 3	Module 5 Stigma and Discrimination Related to MTCT Module 6 HIV Testing and Counselling for PMTCT
Day 4	Module 7 Linkages to Treatment, Care, and Support for Mothers and Families with HIV Infection Module 8 Safety and Supportive Care in the Work Environment
Day 5	Module 9 PMTCT Programme Monitoring Closing the Course
Day 6 (Optional half day session)	Field Visit and de-briefing

Endnote to Trainer Manual introduction

As a trainer, you are a facilitator of learning, not merely an instructor. Encourage participants to identify their aims and objectives for the course. As a trainer, you will help them accomplish those aims and objectives. Remember that all members of the group respect and learn from each other's unique skills, perspectives, and life experiences.



Course Overview and Introduction



Total Time: 100 minutes

SESSION 1 Course Overview and Introduction

Activity/Method	Resources Needed	Time
Introduce course structure and organisation Review course syllabus and give overview of materials	None, other than those listed below	20 minutes

SESSION 2 Ice Breaker and Ground Rules

Activity/Method	Resources Needed	Time
Introduction Exercise 1: “Getting to know each other” card game	12 x 20 cm (approximately) cards or plain paper, divided into three columns labelled: “Concerns,” “Objectives,” and “Strengths” Tape	30 minutes
Explanation of anonymous question bowl or envelope	Bowl or large manila envelope	
Introduction Exercise 2: Determining the ground rules for the course	Tape	20 minutes

SESSION 3 Pre-test (optional)

Activity/Method	Resources Needed	Time
Explain and distribute course pre-test	Copies of the pre-test: one per participant	30 minutes

For all sessions, also have available the following:

- Flipchart or whiteboard and markers or blackboard and chalk
- Pencil or pen for each participant

SESSION 1 Course Overview and Introduction



Advance Preparation

The trainer should be completely familiar with the course materials and be prepared to address participants' questions.



Total Session Time: 20 minutes

After completing the overview and introduction, participants will:

- Understand the structure and organisation of the course.
- Be acquainted with other participants in the course.
- Verbalise concerns about HIV/AIDS in the healthcare setting.
- Identify the ground rules for the course.
- Complete the pre-test.

Note: Whenever possible, conduct all of the sessions in the Course Overview and Introduction as part of the Opening Ceremony. If there is no Opening Ceremony, the Course Overview and Introduction may be incorporated into Day 1 of the training.



Trainer Instructions

Provide an overview of MTCT and PMTCT using the information below as a guide. Discuss the course's function in the context of PMTCT (details are provided below). This information may be presented by the trainer or a guest speaker during the Opening Ceremony or it may be presented by the trainer on the first day of training.

Background on mother-to-child transmission (MTCT) of HIV programmes

Of the 40 million people living with HIV/AIDS worldwide at the end of 2003, 2.5 million were children under 15 years old. Last year alone, 700,000 children were newly infected with the AIDS virus, or about 2,000 new infections in children each day. Most of these infections (90%) occurred in sub-Saharan Africa. The most significant source of HIV infection in children and infants is transmission of HIV from mother-to-child during pregnancy, labour and delivery, or breastfeeding. By integrating comprehensive Prevention of Mother-to-Child Transmission of HIV (PMTCT) programmes—including prevention and treatment interventions—as an essential part of maternal-child health (MCH) programmes, the PMTCT programme may significantly reduce the number of infants who are HIV-infected and promote better health for their mothers and families.

Unprecedented commitment by international organisations and national governments—and the availability of effective short-course and longer combination antiretroviral regimens—are now making effective national PMTCT programmes possible, even in countries most burdened by the HIV epidemic.

Because PMTCT programmes have broad access to the sexually active adult population and address key issues of family health, they provide an important foundation for national HIV prevention and treatment programmes. Beginning with primary prevention, PMTCT programmes recognise the importance of knowing one's HIV status and keeping parents-to-be HIV-negative. Testing and counselling in antenatal clinics and maternities allows for early identification of HIV infection. These settings serve as a gateway to comprehensive PMTCT services, including ARV treatment and prophylaxis, safer delivery practices, and safer infant-feeding practices for mothers who are HIV-exposed and their infants, who are also HIV-exposed.

National scale-up

Pilot projects in multiple countries have demonstrated the feasibility of implementing various PMTCT interventions, including ARV prophylaxis in resource-constrained settings. Most countries are now shifting from pilot projects to national programmes and are integrating PMTCT interventions as a component of standard antenatal care (ANC) and maternal and child health (MCH) services.

There is an increasing range of PMTCT interventions, based on capacity and policy at the country level. Policymakers must determine which PMTCT programme interventions can be supported for national scale-up and ensure that guidelines are in place to promote the success of implementing the programme. A coordinated, national plan for building capacity to train and strengthen maternal and child health services at the local level will ensure beneficial outcomes for communities and the people they serve.

International support

PMTCT remains central to global HIV/AIDS initiatives. Currently, scale-up of PMTCT programmes is recognised as an important gateway for scale-up of broader HIV prevention and care programmes. With the commitment of the international community to increasing access to treatment for persons living with HIV/AIDS, PMTCT programmes are seen as a central rallying point for enhanced treatment, care and support services for women, their children and families. This has resulted in growing support for PMTCT and new international initiatives to combat HIV/AIDS. The Global Fund for AIDS, TB and Malaria (GFATM) is providing significant international support for HIV/AIDS country programmes. The “3 by 5” World Health Organization (WHO)-led UNAIDS initiative aims to treat 3 million people in developing countries by 2005. In addition, the U.S. government now offers unprecedented support in the fight against HIV/AIDS with the President's Emergency Plan for AIDS Relief. The Emergency Plan provides large-scale funding to treat 2 million people, prevent 7 million infections, and provide care for 10 million people.

Key programme elements for all of these international efforts include increasing access to HIV testing and counselling, strengthening prevention interventions linked to treatment services, enhancing access to PMTCT programmes, and fostering community participation.

Training and capacity development

To achieve their goals, initiatives to combat HIV/AIDS need to address the challenge of human capacity building at all levels of the health system. Globally, up to 100,000 people need to be trained for the "3 by 5" initiative to reach the target. Meeting that training goal will require strong collaboration among communities, nations, and international organisations.

The rapidly growing HIV/AIDS pandemic requires global and in-country collaborative efforts to maximise the use of existing human resources and develop strengthened human capacity. Training is a key part of this strategy.

This generic PMTCT training package is designed to provide a template for the development of a national training plan and an appropriate national curriculum, based on a rapid adaptation process. For countries that already have begun PMTCT training and have draft materials, this generic training package can be used to update and strengthen the national curriculum and training plan. Providing appropriate information and training for the cadres of health workers at provincial, district, and local level is an important step for scale-up and sustainability of PMTCT programmes.



Trainer Instructions

Briefly introduce basic information about the course structure.



Make These Points

- Ensure all participants are familiar with the syllabus. Note that the course is designed to span 6 days including the optional field visit. Reiterate key organisational and logistical details, including daily start times, end times, and breaks.
- Stress the importance of group interaction and participation.
- Ensure that participants understand the structure and purpose of all course materials. Point out that the Participant Manual includes an instruction sheet for each group activity. Explain that the support tools should serve as handy references for use in the healthcare setting.
- Remind participants to bring the Participant Manual with them each day and to be prepared to use it throughout the course.



Trainer Instructions

Explain the key features of the course. Feel free to refer participants to the following paragraphs in the Introduction to the Participant Manual rather than covering them in detail.

Overview of the PMTCT generic training package

This training package is an evidence-based course on PMTCT and is targeted to resource-constrained settings. It is intended to be one component of a training plan that reflects the policies and priorities of national strategies for combating HIV/AIDS.

The package content, provided in modular format, presents the basic components of PMTCT programming. The time frames suggested for each module are intended to be flexible to meet the requirements of each country or region.

PMTCT refers to a comprehensive, family-centred spectrum of clinical and supportive services—provided in conjunction with public health initiatives—to prevent the transmission of HIV from a woman to her infant.

Development of the PMTCT generic training package

The development of this package involved several activities:

- WHO conducted a systematic inventory of MTCT training materials, strategies, and plans for scale-up in East, Central, and Southern Africa.
- In 2001, visits were made to review pilot project sites, training strategies, and scale-up plans. PMTCT trainers, staff from the Ministry of Health, national AIDS programme, local NGOs, and funding agencies provided valuable input.
- In 2002, a WHO interregional workshop brought consultants together to arrive at a consensus on package components and implementation of training strategies, including in-country roles for the scale-up process.
- In November 2002, WHO invited the U.S. Centers for Disease Control and Prevention (CDC) to collaborate on the development of a comprehensive training package.¹ CDC asked two university technical assistance partners to help with the development of materials and field testing: the François-Xavier Bagnoud Center at the University of Medicine and Dentistry of New Jersey and JHPIEGO, an affiliate of Johns Hopkins University.
- Field tests were conducted in Guyana, Ethiopia, Mozambique, and Cambodia to evaluate the package and gauge its adaptability for use in resource-constrained settings.
- The package was reviewed by PMTCT and training experts from WHO, CDC, and country programmes.
- The package will be updated on an ongoing basis to reflect the most current information from WHO and CDC about PMTCT.

¹ A training package consists of a range of complementary components on a selected topic that serves as a resource for training. The components may include, for example, participant materials, slide sets, treatment guidelines, clinician support tools (eg pocket guide, wall charts), patient information materials, case studies, and trainer support materials.

Target audience

This training course is targeted to staff working in (or intending to work in) PMTCT programmes or healthcare settings that provide PMTCT services:

- Doctors
- Nurses
- Midwives
- Social workers
- Outreach workers
- Counsellors
- Programme managers

Every setting that provides PMTCT services can maximise the effectiveness of their programmes by involving staff in specialised training and encouraging other healthcare workers to expand their existing knowledge, defining them as key members of the PMTCT programme team.

Hands-on clinical training is strongly recommended. Where feasible, complementary onsite or offsite clinical training—especially in HIV testing and counselling and infant-feeding counselling—will greatly improve the capacity of healthcare workers to use their new knowledge.

**Trainer Instructions**

As necessary, clarify terminology used in the course, as explained below.

A word on terminology

In these course materials, the term “healthcare worker” is intended to be synonymous with “healthcare provider.” It includes all staff working in the PMTCT service system (doctors, nurses, midwives, social workers, outreach workers, counsellors, programme managers). “Maternal and child health” (MCH) is used to refer to a variety of services, including maternal and newborn child health services and reproductive and child health services (RCHS). MCH encompasses the system of treatment, care, and support that aims to protect and improve the health of women of reproductive age and their infants, as well as young and adolescent children, and families.

**Trainer Instructions**

Provide an outline of the course by reviewing the Participant Manual with the group, pointing out the title of each module, the appendices associated with each section, the overheads or slides, the Pocket Guide, and the Wall Charts.

Expectations for the course

This course offers basic information and introductory skills development in the following areas:

- Module 1 Introduction to HIV/AIDS
- Module 2 Overview of HIV Prevention in Mothers, Infants, and Young Children
- Module 3 Specific Interventions to Prevent MTCT
- Module 4 Infant Feeding in the Context of HIV Infection
- Module 5 Stigma and Discrimination Related to MTCT
- Module 6 HIV Testing and Counselling for PMTCT
- Module 7 Linkages to Treatment, Care, and Support for Mothers and Families with HIV Infection
- Module 8 Safety and Supportive Care in the Work Environment
- Module 9 PMTCT Programme Monitoring



Make These Points

- Clarify that the course will provide the knowledge and skills participants need to implement core PMTCT activities in an integrated manner.
- Encourage participants to pursue further training in specific areas of interest.
- Emphasise the importance of hands-on clinical training, whether onsite or offsite.

This PMTCT training course is designed to provide healthcare workers with the information and introductory skills necessary to deliver core PMTCT services in an integrated manner.

Healthcare workers are encouraged to pursue additional training to expand the expertise available in their region or facility.

There is no substitute for hands-on experience when providing both clinical and social support. All participants are encouraged to view this curriculum as providing a foundation on which to build and develop additional skills.

This can be done through specialised training in areas such as HIV counselling, infant feeding, or networking within local communities. Many of these skills require practice to develop proficiency and participants can benefit by actively seeking opportunities for becoming comfortable with all aspects of programme implementation.



Trainer Instructions

Provide an overview of the course materials and the use of the Participant Manual as an ongoing reference throughout the course.

Structure of the training package

The training package, available in printed form and as a CD-ROM, consists of the following components:

- The **Training Programme and Course Director Guide** is divided into two sections. **Section 1: Training Programme Guide** is targeted to those with overall responsibility for developing the PMTCT National Training Plan, adapting the generic PMTCT curriculum, and developing the plan to evaluate training efforts. **Section 2: Course Director Guide** is a resource document targeted to the individual or team responsible for organising and conducting the PMTCT training courses.
- The **Trainer Manual** outlines the entire curriculum, describes the trainer role in course planning and offers the trainer directions to conduct each session.
- The **Participant Manual** is the main reference document for course participants. It includes an Introduction, nine content modules, each with a summary, clearly stated objectives, technical information, and exercises. It also contains a **Glossary** and a **Resources Guide**.
- The **Presentation Booklet** includes slides/overheads that summarise the main content areas of each module.
- The **Pocket Guide** provides clear, concise information to support the delivery of services and is a handy reference for healthcare workers.
- The **Wall Charts** can be posted in the health centre or facility and are a reference on key PMTCT content areas.

SESSION 2 Ice Breaker and Ground Rules



Advance Preparation

For Introduction Exercise 1: “Getting to know each other” card game, ensure there are enough cards or sheets of plain paper (approximately 12 x 20 cm) so that each participant receives one. Each card or sheet of paper should be divided into 3 columns: the first labelled “Concerns;” the second, “Objectives;” and the last, “Strengths.”



Total Session Time: 50 minutes



Trainer Instructions

Discussing or teaching about HIV/AIDS can be difficult, and can trigger feelings about a range of issues, including sexuality, illegal drugs, stigma, fear, and distrust. Those issues are viewed within the context of the cultural and religious beliefs of those who are affected and the communities in which they live. Be aware that addressing HIV/AIDS in the clinical setting may raise an even higher level of fear in healthcare workers.



Trainer Instructions

Once you have completed the overview of the course and materials, it is important to set the appropriate tone. Create an atmosphere in which participants feel comfortable expressing fears and concerns.

Use the “Getting to know each other card game” to elicit introductions, create a comfortable and non-threatening atmosphere, and confront conflicting or inaccurate opinions.



Make These Points

- Acknowledge that you realise that HIV/AIDS is a frightening disease for which science does not have all the answers. Doing so will give participants permission to share their own fears and concerns.

Introduction Exercise 1: “Getting to know each other” card game	
Purpose	<p>Explore participants’ concerns about taking care of women with HIV Introduce objectives for this training.</p> <p>Provide an opportunity to get to know each other.</p>
Duration	30 minutes
Instructions	<p>Welcome participants to the training course and explain that this introductory exercise will help them to:</p> <ul style="list-style-type: none"> ▪ Explore their individual concerns as providers of HIV/AIDS care ▪ Establish their individual goals and objectives for the course ▪ Realise the value of their professions and acknowledge the personal strengths they bring to their work
Activities	<p>Distribute one card or sheet of paper to each participant. Explain that they will not be collected.</p> <p>Ask participants to spend 5 minutes thinking about the following questions and then to write their responses on their card or paper.</p> <ul style="list-style-type: none"> ▪ Concerns: What concerns you about taking care of women and children with AIDS? ▪ Objectives: What do you want to learn or take away with you at the end of the course? ▪ Strengths: What three strengths do you bring to your work as a healthcare provider? <p>While they complete their answers, write each question on a separate piece of flipchart paper and tape it to the wall, or divide the blackboard into sections and write one question at the top of each.</p> <p>Ask for responses and write each on the flipchart paper or blackboard. Allow for some discussion while documenting the concerns. Limit discussion about objectives; you will be discussing them later in the day.</p> <p>Discuss the participants' strengths and the role they play in the care of women and children—with and without HIV/AIDS.</p>
Debriefing	<p>Acknowledge that many healthcare workers must confront HIV/AIDS not only at work, but also at home and in their communities. This training aims to support the participants in their efforts to cope with the wide-reaching impact of HIV disease.</p> <p>Validate the individual concerns they have as healthcare workers in HIV/AIDS.</p> <p>Acknowledge the importance of professional affirmation.</p> <p>Support the strengths they bring to their work.</p> <p>Close by affirming their experiences and by acknowledging that:</p> <ul style="list-style-type: none"> ▪ Healthcare workers often are insufficiently recognised for their efforts and ▪ Busy schedules can prevent them from sharing their time and ideas with colleagues.



Trainer Instructions

Anonymous question bowl or envelope

Some questions are difficult to ask in a group. Set up a question bowl or envelope along with paper and a pen or pencil. Place those materials, if possible, in an inconspicuous but accessible location. When participants have a question that they do not want to ask in the group setting, they can write it down and place it in the bowl or envelope.

Tell participants about the bowl, show them where it is, and invite them to submit questions about HIV/AIDS at any time. Explain that the questions may include concerns about themselves, their families, co-workers, or patients.

Check the bowl each day before lunch and read the questions aloud to the group. Explain that you will give the group time to think about the questions and that after the afternoon break, you will ask for their responses so the group can learn together. Set aside a few minutes after the afternoon break to allow the participants to share their thoughts.

Ensure that participants leave the session knowing the correct answers to the questions. If an incorrect or misinformed response is offered, provide the correct answer in a clear but tactful way.



Make These Points

- Explain that although the course is interactive, it can be difficult or uncomfortable to ask questions in the group setting. If a question concerns a topic that is to be covered later in the course, tell the participants that you will wait to address the question until that time.



Trainer Instructions

For participants to meet their expectations and the course objectives, the group should establish standards for group interaction. Establishing ground rules provides an opportunity for participants to discuss their previous training experiences and to share examples of effective approaches to training.

Facilitate the activity below to help the group establish ground rules for the course and shared norms for conduct.

Introduction Exercise 2: Determining the ground rules for the course	
Purpose	Develop and agree on a set of ground rules that will guide the development of an environment that facilitates learning.
Duration	20 minutes
Instructions	<p>We want to learn about national efforts to decrease MTCT, but we also want to create a safe space for sharing what we have already learned: the successes and failures, the sorrows and the joys. To do that, we need to agree on some ground rules.</p> <p>Ask the group what ground rules would make them feel more comfortable about contributing to discussions.</p>
Activities	<p>If the group is slow to offer suggestions, consider the following examples:</p> <ul style="list-style-type: none"> ▪ We will respect others, in our language, posture, and tone of voice. ▪ It is up to the individual whether he or she wants to contribute during an activity. ▪ Participants will raise their hands to ask questions or make comments. ▪ Anyone may contribute ideas, but the trainer may set limits on speaking time. ▪ We will speak one at a time and avoid whispering or side conversations. ▪ We will protect each other's confidentiality ("What's said here, stays here.") and use general rather than specific examples. ▪ Each member of the group will attend to his or her own comfort needs (refreshment, restroom, stretching breaks). ▪ We will be on time for each session.
Debriefing	<p>Ask what other ground rules participants would like to add to the list.</p> <ul style="list-style-type: none"> ▪ Make sure everyone agrees on the rules. ▪ Write the rules and post them on the wall. ▪ Keep the ground rules visible throughout the entire training course.

SESSION 3 Pre-test (optional)



Advance Preparation

Review the pre-test to ensure that it is appropriate for the participants (not too difficult but not too easy). Make enough copies of the test for each person to have one. Have extra pens or pencils available.



Total Session Time: 30 minutes



Trainer Instructions

The overview and introduction will conclude with the pre-test.

Distribute the test to participants. Inform participants that the post-test will include the same questions as the pre-test. Comparing the answers to the pre- and post-test questionnaire will measure the changes that occur in the group's (not an individual's) knowledge between the beginning and the end of the course. The results will provide some indication of whether the material and teaching methods have been successful. This questionnaire will be re-administered just before the closing session (as the post-test).

Keep track of the time. After 20 minutes, remind participants that you will be collecting the tests in about 10 more minutes. Assure participants that if they need more time, you will provide it.

Collect the completed tests (after about 30 minutes).

Thank participants and review the schedule for the following day.

Address questions or concerns about the course.



Make These Points

- Tests will be anonymous.
- Participants will be tested again after the course to measure how much the group learns. After the post-tests are collected (on the last day of training) the test questions will be reviewed.
- Remind participants of the next session's starting time.
- Remind participants to bring their Participant Manual to every session.